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SEP 1 0 2004

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TO:

FROM:

Name: Mail Stop AMENDMENT

Name:

Thomas H. Martin, Esq.

Group Art Unit 3738

Firm: U.S. Patent & Trademark Office

Phone No.: 330-877-2277

Fax No.: 703-872-9306

No. of Pages (including this): 13

Subject: U.S. Patent Application No. 10/740,747

Date:

September 10, 2004

Gary Karlin Michelson Filed: December 19, 2003

SPINAL IMPLANT FOR INSERTION BETWEEN

VERTEBRAL BODIES

Attorney Docket No. 102.0001-12000

Customer No. 22882 Confirmation No.: 4978 Confirmation Copy to Follow: NO

Message:

CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8

I hereby certify that the attached Transmittal Form (in duplicate), Amendment, Second Request for Interference Under 37 C.F.R. § 1.604, and Third Request for Interference Under 37 C.F.R. § 1.604 are being facsimile transmitted to the U.S. Patent and Trademark Office on September 10, 2004.

Sandra L. Blackmon

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09-10-2004 17:48

FORM PTO-1083

PATENT

Attorney Docket No.: 102.0001-12000

Customer Number 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Gary Karlin Michelson

Serial No: 10/740,747

Filed: December 19, 2003

SPINAL IMPLANT FOR INSERTION BETWEEN VERTEBRAL BODIES

Confirmation No.: 4978

Art Unit:

3738

Mail Stop AMENDMENT Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

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SEP 1 0 2004

Dear Sir:

Transmitted herewith is an Amendment in the above-identified application.

- No additional fee is required.
- Applicant hereby requests a ***-month extension of time to respond to the above office action.
- A Second Request for Interference Under 37 C.F.R. § 1.604 and a Third Request for Interference Under 37 C.F.R. § 1.604 are enclosed.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBI PREVIOUSLY PAID		(Col. 3) PRESENT EXTRA	LG/SM \$ ENTITY FEE	DD'L E DUE
TOTAL CLAIMS FEE	9	1-	20	RF	0	LG=\$18 \$18 SM=\$9	\$ 0
INDEPENDENT CLAIMS FEE	3	1.	3	•	0	LG=\$84 SM=\$42 \$84	\$ 0
	N OF MULTIPLE DEPENDENT	CLAIM	٤			E ENTITY FEE = \$260 L ENTITY FEE = \$130	\$ 0
		101.				TOTAL	\$ 0

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or independent) is the nighest number toung from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

Γ	٦	A fee in the amount of \$	to cover the additional claims fee is enclosed
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A fee in the amount of \$____ to cover the *** -month extension of time fee is enclosed.

The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1368. A copy of this sheet is enclosed.

Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims

Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted, MARTIN & FERRARO LLP

Date: September 10, 2004

1557 Lake O'Pines Street, NE Hartville, Ohio 44632

Telephone: 330-877-0700 Facsimile: 330-877-2030

Thomas H. Marin Registration No. 34,383

FORM PTO-1083

PATENT

Attorney Docket No.: 102.0001-12000

Customer Number 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Gary Karlin Michelson Serial No: 10/740,747 Filed: December 19, 2003

Confirmation No.: 4978

3308772030

Art Unit:

3738

SPINAL IMPLANT FOR INSERTION For:

BETWEEN VERTEBRAL BODIES

Mail Stop AMENDMENT Commissioner for Patents P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

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The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIĞHEST NUMI PREVIOUSLY PAI		(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	DUE
TOTAL CLAIMS FEE	9	-	20		0	LG=\$18 SM=\$9	\$ 0
INDEPENDENT CLAIMS FEE	3	-	3	>#+	Ó	LG=\$84 \$M=\$42	\$ ٥
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS LARGE ENTITY FEE = \$260 3MALL ENTITY FEE = \$130						\$ 0	
						TOTAL	\$ 0

If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

П	A fee in the amount of \$	to cover the additional claims fee is enclosed.
	7 (100 II) (110 GITTOG) (1 4 ———	_ 12 22 4 11/13 422 123 1121 2121 12 12 12 21 21

_ to cover the *** -month extension of time fee is enclosed. A fee in the amount of \$____

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Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims

Ø Any patent application processing fees under 37 C.F.R. § 1.17

> Respectfully submitted, MARTIN & FERRARO LLP

Date: September 10, 2004

Thomas H. Manin Registration No. 34,383

1557 Lake O'Pines Street, NE Hartville, Ohio 44632 Telephone: 330-877-0700

Facsimile: 330-877-2030

From-MARTIN&FERRAROLLP

PATENT Attorney Docket No. 102.0001-12000 Customer No. 22882

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	Confirmation No.: 4978
Gary Karlin Michelson)	
Serial No.: 10/740,747)	Group Art Unit: 3738
Filed: December 19, 2003)	
For: SPINAL IMPLANT FOR INSERTION)	
BETWEEN VERTEBRAL BODIES)	

Mail Stop AMENDMENT Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

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Sir:

AMENDMENT

Prior to the examination of the above-identified application, the following amendments and remarks are submitted:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks begin on page 4 of this paper.